

(1) Person Filing: _____
 Mailing Address: _____
 City, State, Zip Code: _____
 Daytime / Evening Phone: _____
 In this case I am: ☐ a Petitioner or a ☐ Respondent ☐ Represented by Attorney
 If Attorney, Name: _____ Bar No.: _____
 Attorney Phone: _____

SUPERIOR COURT of ARIZONA in MARICOPA COUNTY

(2) _____
 Petitioner (in original case)

(3) Case No. _____

(4) ATLAS No. _____

(2) _____
 Respondent (in original case)

PETITION TO STOP ORDER OF ASSIGNMENT A.R.S. § 25-504

**THIS FORM IS NOT TO BE USED TO REQUEST A CHANGE IN YOUR EXISTING SUPPORT ORDER.
THIS FORM ONLY APPLIES TO THE ORDER OF ASSIGNMENT.**

I, (5) _____, ask the Court to terminate the ***"Order of Assignment"***
 issued on: (6) _____ (Month/Day/Year)
 The Order was issued by: _____ (Name of Court)
 Located in this County: _____ (Name of County)
 Located in this State: _____ (Name of State)

because all back child support and back alimony (spousal maintenance) have been paid and the obligation to pay current support and maintenance has ended for the reasons indicated below, *or will end* as of this date: _____

☐ Child Support was being paid in this case and the person making payments (the Obligor) is no longer obligated to pay current child support, because all children named in the Child Support Order: (Check all that apply):

- ☐ are **18 and not attending high school** or a certified equivalency program
- ☐ are **19**
- ☐ have been **adopted**
- ☐ are **married**
- ☐ are **deceased**
- ☐ are, by Court Order, **no longer in the custody of the person receiving payments.**

☐ The person receiving payments (the Obligee) is deceased (Death Certificate or other proof such as obituary notice is attached)

☐ The case was dismissed.

☐ There are multiple active Orders of Assignment for child support for the same children under different case numbers:

Case Number _____ Case Number _____ Case Number _____

Case No. _____

☐ There are multiple active Orders of Assignment for spousal maintenance for the same spouse under different case numbers:

Case Number _____ Case Number _____ Case Number _____

☐ Other condition for ending payments listed in the underlying support order or permitted by law has occurred. Describe below

(7) ☐ I request the Court to order the Support Payment Clearinghouse to hold any payments received pursuant to the Order of Assignment until further order of the Court. I understand that such Order, if made, is not immediate in effect and additional payments may be sent to the other party before such Order is effected

Note: If any child support or spousal maintenance payments are still owed for parties named in the Order, STOP! You cannot use these forms. You must file a Petition (or Agreement) to "Change" the Assignment or the Support/ Maintenance Order.

Do not write or sign below this line until you are instructed to do so by Court Clerk or Notary.

I affirm the information on this Petition to Stop Order of Assignment by Agreement is true and correct under penalty of perjury.

Date

State of Arizona)
County of _____) ss.

My Commission Expires: _____

(8) Person Filing Request to Stop

Acknowledged before me on: _____

Clerk of the Superior Court or Notary Public

Case No. _____

NOTICE TO OTHER PARTY: If you do not agree with this Petition, you have twenty days, or thirty days if service is made outside the state of Arizona, in which to respond by completing the attached petition for hearing. If requested, a hearing will be set.

If you requested a hearing and you have received payments directly, complete an Affidavit of Direct Payments to bring to the hearing. This form is available at: Maricopa County Superior Court Self Service Center or from the Internet at:

<http://www.superiorcourt.maricopa.gov/ssc/forms/word/drmw32f.doc>

If you do not request a hearing in writing within the time allowed, the Court will review the Petition to Stop Order of Assignment, and will grant the request.